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Comments:

ATTORNEY DOCKET NO.: 324212003200
SERIAL NO.: 10/682,636
FILING DATE: October 8, 2003
INVENTOR(S): Brockton S. DAVIS et al.
TITLE: LEARNED UPLOAD TIME ESTIMATE MODULE

Papers attached herewith:

1. Transmittal - 1 page
2. Power of Attorney - 1 page
3. Statement Under 3.73b - 1 page

sf-1964958

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PTO/SB/21 (08-04)

Approved for use through 07/31/2008, OMB 0551-0031

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<h1>TRANSMITTAL FORM</h1> <p>(to be used for all correspondence after initial filing)</p>		Application Number	10/682,636
		Filing Date	October 8, 2003
		First Named Inventor	Brockton S. DAVIS
		Art Unit	2141
		Examiner Name	Not Yet Assigned
Total Number of Pages in This Submission	3	Attorney Docket Number	324212003200

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address - 1 page <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1. Statement Under 3.73b - 1 page 2. Fax Cover Sheet.
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	MORRISON & FOERSTER LLP (Customer No. 20872)		
Signature			
Printed name	Robert A. Saltzberg		
Date	9/23/05	Reg. No.	36,910

I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, facsimile no. (703) 872-9308, on the date shown below.		
Dated: 9/29/05	Signature:	Christina Carter

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STATEMENT UNDER 37 CFR 3.73(b)Applicant/Patent Owner: Brockton S. DAVIS et al.Application No./Patent No.: 10/682,636 Filed/Issue Date: October 8, 2003Entitled: LEARNED UPLOAD TIME ESTIMATE MODULEYahoo! Inc.
(Name of Assignee), a corporation
(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

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- A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 014604 Frame 0279, or for which a copy thereof is attached.

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- B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

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The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

Signature

Date

Robert A. Saltzberg, Reg. No. 36,810

Printed or Typed Name

(415) 268-6428

Telephone Number

Attorney

Title

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SF-1964847

DOCKET NO. 324212003200

PTO/SB/80 (11-04)

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I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b).

I hereby appoint:



Practitioners associated with the Customer Number:

20872

OR



Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used):

Name	Registration Number	Name	Registration Number

as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b).

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Firm or Individual Name

Address

City

State

Zip

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Assignee Name and Address:

Quantum Corporation
1650 Technology Drive, Suite 800
San Jose, California 95110

A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/80 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.

SIGNATURE of Assignee of Record

The individual whose signature and title is supplied below is authorized to act on behalf of the assignee

Signature	<i>Shawn D. Hall</i>	Date	7/14/05
Name	Shawn D. Hall	Telephone	408-944-4000
Title	Vice President, General Counsel & Secretary		

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